

jfu



PATENT

ATTORNEY DOCKET NO. 00786/549002

Certificate of Mailing: Date of Deposit: 5/28/08

I hereby certify under 37 C.F.R. § 1.8(a) that this correspondence is being deposited with the United States Postal Service as **first class mail** with sufficient postage on the date indicated above and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Colleen Lombard

Printed name of person mailing correspondence

Colleen Lombard

Signature of person mailing correspondence

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|-------------|---|-------------------|-----------|
| Applicant: | F. Richard Bringhurst et al. | Confirmation No.: | 4272 |
| Serial No.: | 09/447,800 | Art Unit: | 1647 |
| Filed: | November 23, 1999 | Examiner: | S. Wegert |
| | | Customer No.: | 21559 |
| Title: | AMINO-TERMINAL MODIFIED PARATHYROID HORMONE (PTH) ANALOGS | | |

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REVOCATION AND NEW POWER OF ATTORNEY

Under 37 C.F.R. § 3.73(b), THE GENERAL HOSPITAL CORPORATION, a corporation, certifies that it is the assignee of 100% of the right, title, and interest in the patent application identified above by virtue of:

An assignment from the inventors of the application. The assignment was recorded in the Patent and Trademark Office at Reel 010740, Frame 0561 on April 11, 2000.

The undersigned has reviewed all the documents in the chain of title of the application and, to the best of undersigned's knowledge and belief, title is in the assignee identified above.

The undersigned, whose title is supplied below, is empowered to act on behalf of the assignee.

The undersigned, acting on behalf of the assignee, hereby revokes all powers of attorney previously granted in the application and appoints the attorneys and/or agents of Clark & Elbing LLP, associated with customer number **21559**, with full power of substitution and revocation, to prosecute the application and to transact all business in the United States Patent and Trademark Office connected therewith.

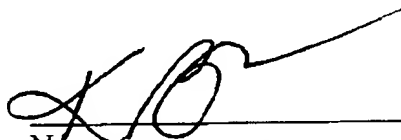
All correspondence regarding the application should be sent to the address associated with customer number **21559**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Respectfully submitted,

Date:

MAY 19 2008



Name:

Kris Ann Betres, J.D.

Title:

Licensing Manager
The General Hospital Corporation